



ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>PH</i>	<i>02142</i>	<i>4/24/02</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>DMIC</i>	<i>6916</i>	<i>6/26/02</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	10/16/02
2	10/16/02
3	10/16/02
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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